

Division of Disability, Aging and Rehabilitative Services
402 W. WASHINGTON STREET, ROOM W382
INDIANAPOLIS, IN 46204-2739

John Hamilton, Secretary

To: DD and Support Services Waiver Interested Parties

From: Alison Becker, Director, Fiscal Services

Steve Cook, Director, Developmental Disabilities Services

Date: April 23, 2002

Re: DD Waiver Bulletin 16- New Service Rates

Support Services Waiver Bulletin 1-New Service Rates

Attached please find a <u>chart detailing new rates</u> for the Support Services and DD Waivers, effective April 1, 2002. While these rates are effective April 1, software changes are being finalized and payment will not be available until May 1, 2002 for services rendered under these categories (including ALL Support Service Waiver services). Specific information about each new rate is detailed below.

We will be holding an information session about these new service rates on May 6, 2002 at 9:30 at the Indiana Government Center Conference Center Auditorium. It is anticipated to last approximately three hours. We hope you will be able to attend. Please contact Linda Church at 317/232-4644 or lchurch@fssa.state.in.us to register. ONLY individuals who register will be guaranteed the availability of training materials.

Psychological Therapy

- Can be provided to an individual, family or in a group.
- Must be a licensed Psychologist in the State of Indiana.
- Linda Wolcott, Provider Relations Specialist, does certification. In addition to usual provider certification requirements, you must demonstrate proof of license to practice Psychology.
- No automatic certifications will be done.



• Billing is on the standard HCFA 1500 form in 15-minute increments.

Nutritional Counseling

- Must be a qualified Dietitian in the State of Indiana.
- Linda Wolcott, Provider Relations Specialist, does certification. In addition to usual provider certification requirements, you must demonstrate proof of certification as a Dietitian.
- No automatic certifications will be done.
- Billing is on the standard HCFA 1500 form in 15-minute increments.

Music Therapy

- Must be a qualified Music Therapist, as certified by the National Association of Music Therapists
- Linda Wolcott, Provider Relations Specialist, does certification. In addition to usual provider certification requirements, you must demonstrate proof of certification.
- No automatic certifications will be done.
- Billing is on the standard HCFA 1500 form in 15-minute increments.
- Any special equipment needed for the performance of Music Therapy should be purchased under the provisions set forth in Specialized Medical Equipment and Supplies.

Recreational Therapy

- Must hold a Bachelor's in therapeutic recreation and be certified by the National Council for Therapeutic Recreation.
- Linda Wolcott, Provider Relations Specialist, does certification. In addition to usual provider certification requirements, you must demonstrate proof of certification.
- No automatic certifications will be done.
- Billing is on the standard HCFA 1500 form in 15-minute increments.
- Recreational therapies such as horseback therapy may be billed to Recreational Therapy or "Community Educational/Therapeutic Activity" (see below), but not both services.

Community Educational/Therapeutic Activity (CETA)

- Must be a certified provider under Residential Habilitation and Support (RHS)or Community Habilitation and Participation (CHP)
- Current Personal Assistance (PA) or Residential-Based Habilitation (RBH) providers will be automatically certified for RHS, CHP and CETA.
- Activities include camps, educational experiences, horseback therapy, etc.
- Individuals are limited to \$2,000 a year in CETA services.
- The RHS or CHP provider may serve as the fiscal intermediary for other activities such as a summer camp.
- The RHS or CHP provider may not bill an administrative fee associated with being the fiscal intermediary.

• Billing is on the standard HCFA 1500 form, at the actual reimbursable expense per activity.

Home Modifications (DD Waiver only) and Specialized Medical Equipment and Supplies-Assessment/Inspection/Training

- Must be a qualified provider as listed in either the DD or Support Services Waiver Manual.
- Linda Wolcott, Provider Relations Specialist, does certification. In addition to usual provider certification requirements, you must demonstrate proof of appropriate certification.
- No automatic certifications will be done.
- Assessment, inspection and training may all be done under the same procedure code, but could have different providers selected for each one.
- Billing is on the standard HCFA 1500 form in 15-minute increments.

Rent and Food for Unrelated Live-In Caregiver

- Payment must be made directly to Waiver recipient.
- Must be a certified provider under Residential Habilitation and Support (RHS) or Community Habilitation and Participation (CHP). RHS and CHP providers will be automatically approved to provide this service.
- Caregiver and recipient must comply with standards set forth in either the DD or Support Services Waiver Manual, as applicable.
- Unit is based on costs incurred for the rent and food for the caregiver, with the maximum amount being \$545 per month.
- The RHS or CHP provider may serve as the fiscal intermediary for this service.
- The RHS or CHP provider may not bill an administrative fee associated with being the fiscal intermediary.
- Billing in on the standard HCFA 1500 form, at the actual amount of expense per month.

Family and Caregiver Training

- Has been modified from \$26.94 per quarter hour to a maximum of \$2,000 per year.
- Can be utilized for training in the home, conferences, seminars, etc.
- This covers registration at in-state training or out-of-state training within driving distance (airfare, meals, hotel accommodations, etc. are not reimbursable under this service).
- Must be a certified provider under Residential Habilitation and Support (RHS) or Community Habilitation and Participation (CHP) to serve as a fiscal intermediary. RHS and CHP providers will be automatically approved to provide this service.
- The RHS or CHP provider may serve as the fiscal intermediary for this service.
- The RHS or CHP provider may not bill an administrative fee associated with being the fiscal intermediary.

- Must be included in the individual's Plan of Care/Cost Comparison Budget in advance of training.
- Billing is on the standard HCFA 1500 form, at the actual reimbursable expense per activity.

Community Habilitation and Support-Individual and Group

- Must be a certified provider under Community Habilitation and Participation (CHP)
- Current Day Habilitation providers will be automatically certified.
- Services may be provided in a Facility or in the Community. Community participation is reimbursed at an enhanced rate.
- Billing is on the standard HCFA 1500 form in one-hour increments.
- Thirty-one minutes or more constitutes a billable unit.

For additional information about becoming a certified Medicaid Waiver provider for any of these-or other waiver services-please contact Linda Wolcott at 317/234-0373 or lwolcott@fssa.state.in.us. For additional information about becoming a Targeted Case Manager, please contact Linda Church at 317/232-4644 or lchurch@fssa.state.in.us.

Additional information will be forthcoming regarding the consolidation of RBH and PA rates into Residential Habilitation and Support and Community Habilitation and Training. Those rates will go into effect on July 1, 2002, with significant training taking place in late May and early June.

As always, thank you for your help in this matter. Please contact Alison at 317/234-1527 or abecker@fssa.state.in.us or Steve Cook at 317/232-7842 or scook3@fssa.state.in.us if you have additional questions or if either of us may be of assistance. We look forward to seeing you on May 6.

Support Services Waiver			
Service	Procedure Code	Unit	Rate
Psychological Therapy-Individual	Z5146	.25 hour	\$15.45
Psychological Therapy-Family	Z5147	.25 hour	\$17.27
Psychological Therapy-Group	Z5148	.25 hour	\$4.81
Nutritional Counseling	Z5149	.25 hour	\$14.47
Music Therapy	Z5156	.25 hour	\$10.78
Recreational Therapy	Z5157	.25 hour	\$10.78
Community Educational/Therapeutic Activity	Z5158	1 Year	\$2,000.00
Specialized Medical Equipment Supplies-Assessment/Inspection/Training	Z5144	.25 hour	\$17.99
Rent/Food Expenses of Unrelated Live-In Caregiver	Z5160	1 Month	\$545.00
Community Habilitation and Participation-Community Based Individual	Z5163	1 hour	\$33.52
Community Habilitation and Participation-Community Based Group	Z5164	1 hour	\$6.68
Community Habilitation and Participation-Facility Based Individual	Z5165	1 hour	\$27.58
Community Habilitation and Participation-Facility Based Group	Z5166	1hour	\$5.34
Family and Caregiver Training	Z5024	1 Year	\$2,000.00
DD Waiver			
Service	Procedure Code	Unit	Rate
Service Psychological Therapy-Individual	Procedure Code Z5146	Unit .25 hour	Rate \$15.45
Psychological Therapy-Individual	Z5146	.25 hour	\$15.45
Psychological Therapy-Individual Psychological Therapy-Family	Z5146 Z5147	.25 hour .25 hour	\$15.45 \$17.27
Psychological Therapy-Individual Psychological Therapy-Family Psychological Therapy-Group	Z5146 Z5147 Z5148	.25 hour .25 hour .25 hour	\$15.45 \$17.27 \$4.81
Psychological Therapy-Individual Psychological Therapy-Family Psychological Therapy-Group Nutritional Counseling	Z5146 Z5147 Z5148 Z5149	.25 hour .25 hour .25 hour .25 hour	\$15.45 \$17.27 \$4.81 \$14.47
Psychological Therapy-Individual Psychological Therapy-Family Psychological Therapy-Group Nutritional Counseling Music Therapy	Z5146 Z5147 Z5148 Z5149 Z5156	.25 hour .25 hour .25 hour .25 hour .25 hour	\$15.45 \$17.27 \$4.81 \$14.47 \$10.78
Psychological Therapy-Individual Psychological Therapy-Family Psychological Therapy-Group Nutritional Counseling Music Therapy Recreational Therapy	Z5146 Z5147 Z5148 Z5149 Z5156 Z5157	.25 hour .25 hour .25 hour .25 hour .25 hour .25 hour	\$15.45 \$17.27 \$4.81 \$14.47 \$10.78 \$10.78
Psychological Therapy-Individual Psychological Therapy-Family Psychological Therapy-Group Nutritional Counseling Music Therapy Recreational Therapy Community Educational/Therapeutic Activity	Z5146 Z5147 Z5148 Z5149 Z5156 Z5157 Z5158	.25 hour .25 hour .25 hour .25 hour .25 hour .25 hour 1 Year	\$15.45 \$17.27 \$4.81 \$14.47 \$10.78 \$10.78 \$2,000.00
Psychological Therapy-Individual Psychological Therapy-Family Psychological Therapy-Group Nutritional Counseling Music Therapy Recreational Therapy Community Educational/Therapeutic Activity Home Modifications/Specialized Medical Equipment Supplies-	Z5146 Z5147 Z5148 Z5149 Z5156 Z5157 Z5158	.25 hour .25 hour .25 hour .25 hour .25 hour .25 hour 1 Year	\$15.45 \$17.27 \$4.81 \$14.47 \$10.78 \$10.78 \$2,000.00
Psychological Therapy-Individual Psychological Therapy-Family Psychological Therapy-Group Nutritional Counseling Music Therapy Recreational Therapy Community Educational/Therapeutic Activity Home Modifications/Specialized Medical Equipment Supplies-Assessment/Inspection/Training Rent/Food Expenses of Unrelated Live-In Caregiver	Z5146 Z5147 Z5148 Z5149 Z5156 Z5157 Z5158 Z5144	.25 hour .25 hour .25 hour .25 hour .25 hour .25 hour 1 Year .25 hour	\$15.45 \$17.27 \$4.81 \$14.47 \$10.78 \$10.78 \$2,000.00 \$17.99
Psychological Therapy-Individual Psychological Therapy-Family Psychological Therapy-Group Nutritional Counseling Music Therapy Recreational Therapy Community Educational/Therapeutic Activity Home Modifications/Specialized Medical Equipment Supplies-Assessment/Inspection/Training	Z5146 Z5147 Z5148 Z5149 Z5156 Z5157 Z5158 Z5144	.25 hour .25 hour .25 hour .25 hour .25 hour .25 hour 1 Year .25 hour	\$15.45 \$17.27 \$4.81 \$14.47 \$10.78 \$10.78 \$2,000.00 \$17.99
Psychological Therapy-Individual Psychological Therapy-Group Psychological Therapy-Group Nutritional Counseling Music Therapy Recreational Therapy Community Educational/Therapeutic Activity Home Modifications/Specialized Medical Equipment Supplies-Assessment/Inspection/Training Rent/Food Expenses of Unrelated Live-In Caregiver Community Habilitation and Participation-Community Based Individual	Z5146 Z5147 Z5148 Z5149 Z5156 Z5157 Z5158 Z5144 Z5160 Z5163	.25 hour .25 hour .25 hour .25 hour .25 hour .25 hour 1 Year .25 hour 1 Month 1 hour	\$15.45 \$17.27 \$4.81 \$14.47 \$10.78 \$10.78 \$2,000.00 \$17.99 \$545.00 \$33.52
Psychological Therapy-Individual Psychological Therapy-Family Psychological Therapy-Group Nutritional Counseling Music Therapy Recreational Therapy Community Educational/Therapeutic Activity Home Modifications/Specialized Medical Equipment Supplies-Assessment/Inspection/Training Rent/Food Expenses of Unrelated Live-In Caregiver Community Habilitation and Participation-Community Based Individual Community Habilitation and Participation-Community Based Group	Z5146 Z5147 Z5148 Z5149 Z5156 Z5157 Z5158 Z5144 Z5160 Z5163 Z5164	.25 hour .25 hour .25 hour .25 hour .25 hour .25 hour 1 Year .25 hour 1 Month 1 hour 1 hour	\$15.45 \$17.27 \$4.81 \$14.47 \$10.78 \$10.78 \$2,000.00 \$17.99 \$545.00 \$33.52 \$6.68